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Scripture, in reason, or in common sense, that goes to prove or intimate that man *by nature* is immortal, or that moral evil, in any way possible to view it, has an affirmative existence in the universe.

To teach such a doctrine is to teach a gross dualism, a doctrine that the universe is the joint product and battle-ground of two co-extensive opposing Powers. This in itself is not only a worse Atheism than Mr. Ingersoll has ever taught, but a worse form than he has ever been accused of teaching.

To say that evil depends for its existence wholly upon relations, and that it is in its nature essentially self-destructive, is one of the main pillars of a true Theism. While, on the other hand, to maintain that evil is inherently indestructible, eternal, and coextensive with good, is not only to unsouverain Jehovah, but tantamount to characterizing God as imbecility.

Many as are the highest and best authorities easy to be produced here in substantiation of the unquestionable fact, that immortality, while the *end* and *goal* of creation, depends wholly upon *conditions*,—which must be answered sooner or later,—I content myself with only one from the fast growing recognized intellectual king of the nineteenth century,—Goethe,—in the second part of “Faust :”

“ Who hath not won a name, and seeks not noble works,
Belongs but to the elements :
Service and faith secure the individual life.”

From which point I stand logically and fully in accord with Mr. Field, that to know God, and Jesus Christ whom he hath sent, is life eternal.

HENRY W. HAZEN.

IV.

THE DISEASE OF INEBRIETY.

THE principles of law which have been laid down regulating the legal relations of the inebriate were framed long before we had obtained any accurate ideas respecting the disease of inebriety, and, therefore, great injustice has been done to the inebriate under the forms of law. The inebriate is a sick man and should neither receive loathing and ostracism at the hands of his friends, nor penal punishment when he commits overt acts at the hands of the law. We must distinguish primarily between those who are ordinary drunkards and those who suffer from the *disease* of dipsomania ; between the individual who merely chooses to indulge in liquor daily and him who is irresistibly impelled by the craving—often periodical—resulting from a morbid irritation of the cortical sensory centres of the brain to indulge in alcoholic stimulants, and to frequent fits of intoxication.

I will give a typical case to make my meaning clear, and to clearly differentiate between the *vice* and the *disease*.

Some years ago a gentleman of high social standing was put under my care for the treatment of dipsomania. Between his paroxysms he differed from the ordinary drunkard in that he never touched liquor, did not like it, and was a most useful and honored member of society. About once in four months he would become restless, could not apply his mind, was sleepless, and became irritable. Then an imperious and irresistible drink craving would appear, and for days this gentleman would obey an impulse which he had not the power of resisting. He would follow out a course of inebriety at these times, and neither the dictates of affection nor the remonstrances of his many friends availed anything. At the close of his paroxysm, which was the perfect analogue of other periodical insanities, he would deplore, with great mental agony, the impulses by which he was mastered, and resume his

regular and sober habits, never touching a drop of liquor until the time for another paroxysm approached, when the same course was again pursued. The disease was characterized by its paroxysms and intermissions until he was finally cured. I have seen many examples of this disease in ladies of the highest social standing, who had all the virtues of their sex. These people are sick, and this strong, irresistible craving for spirituous drinks is the diagnostic symptom of their disease—Dipsomania, which is a distinct form of mental disorder. The act of drinking is not a voluntary act at all. It is done in obedience to the blind, irresistible craving for the alcoholic stimulus. It is an involuntary act that unintentionally and automatically oftentimes leads to the commission of crime, when such overt acts are committed. To constitute crime there must be moral liberty and an intent to commit crime. The dipsomaniac acts in obedience to a *vis a tergo*, derived from a brain condition that he cannot resist. He acts as the result of the morbid notions in the mind that springs from his disease, and he does not act in response to the suggestions of affection, of reason, and of common sense as sane persons do.

I suppose that it may be urged that I am promulgating truths dangerous to recognize in estimating the degree of criminal responsibility; for, by our code, inebriety does not afford any relief from the ordinary consequence of crime. The clear light of science, however, never reveals truths dangerous to recognize. The danger lies in the opposite direction. The inebriate does not enjoy the free and rational exercise of his understanding; he is more or less unconscious of his outward relations, and none of his acts during his paroxysms can be rightfully imputed to him as crime. The mind is not in the full possession of its powers and oftentimes excited by unfounded delusions, as in a recent case tried in our city before Judge Gildersleeve of a woman who threw her child out of a window under the influence of a delusion the result of a paroxysm of dipsomania. The judge most humanely charged the jury that there would appear to be no doubt as to the prisoner's insanity, and the verdict rendered was "not guilty on the ground of insanity." Judge Storey, in the case of Drew, who killed his second mate, Clark, while in a state of insanity, with hallucinations, the remote cause of which was the excessive use of alcohol, decided that insanity whose remote cause is habitual drunkenness should be an excuse in a court of law for a homicide committed by the party while so insane. Will not society in general accept the conclusions of many celebrated men of profound study and extensive observation, with their authoritative utterances; men like Krafft-Ebbing in Germany; Magnan, in Paris; Hathergill, Sir Thomas Watson, Richardson, Crichton Browne, Peddie and Norman Kerr, in England; Skae and Sir Benj. Brodie, of Edinburgh, and Hagstrom and Huss, of Sweden, who have all been trying to bring about a co-operative public sentiment and legislation relative to the disease of inebriety? Law and medicine should join hands with the cultured public in this matter, and a provision like the following should be introduced into the code of laws in every State, viz.:

By reason of their impaired responsibility, punishment cannot be inflicted on those who commit penal acts in a state induced by the disease of inebriety, which either takes away all consciousness respecting the act generally and its relations to penal law, or in conjunction with some peculiar bodily condition irresistibly impels the subject of this disease, while partially or completely unconscious, to violent acts.

The law can protect society sufficiently without punishing sick men and women, and responsibility should be annulled in that condition in which either a consciousness of the criminality of the offense or the free will of the offender is taken away by disease.

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